

OAHU CANDIDATES-  
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-  
SUBMIT 1 ORIGINAL AND 2 COPIES

# STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## DISCLOSURE REPORT CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

### SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

MELINDA S. JAFFE

(b) Committee Name:

FRIENDS OF MINDY JAFFE

(c) Mailing Address:

1132-F Koko Head Avenue  
Honolulu, HI 96816

(d) Phone (Bus)

545-1121

(Res)

Treasurer's

### SECTION II-TYPE OF REPORT

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
- ☐ 2nd Preliminary Primary ☐ Short Form <sup>1</sup> ☐ Second ☐ Fourth
- ☒ Final Primary
- ☐ Preliminary General
- ☐ Final Election Period
- ☐ Supplemental

RECEIVED

### REPORTING PERIOD

Sept. 9 through Sept. 23, 2000

### SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD <sup>2</sup> TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period <sup>2</sup> .....		-0-
2. Cash on Hand at the Beginning of this Reporting Period.....	2,181.49	
3. Total Receipts (From Line 15).....	5,460.00	29,181.97
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	7,641.49	29,181.97
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	5,661.85	27,202.33
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	1,979.64	1,979.64
7. Total Loans at the Closing of this Reporting Period.....	-0-	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	-0-	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	-0-	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	-0-	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

*Melinda S. Jaffe*  
Candidate Signature

10/13/00  
Date

*Gwen Hong*  
Treasurer Signature

10/13/00  
Date

<sup>1</sup> Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

<sup>2</sup> An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

**SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	625.00	2,205.00	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	4,195.00	7,695.00	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	4,820.00	9,900.00	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	-0-	64.47	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	640.00	19,217.50	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	640.00	19,281.97	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	5,460.00	29,181.97	12
13. Public Funds and Other Receipts.....	-0-	-0-	13
14. Loans.....	-0-	-0-	14
15. Total Receipts (Add Lines 12 through 14).....	5,460.00	29,181.97	15
<b>DISBURSEMENTS</b>			
16. Expenditures.....	5,661.85	27,202.33	16
17. Loans Repaid or Forgiven.....	-0-	-0-	17
18. Unpaid Expenditures Paid or Forgiven.....	-0-	-0-	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	5,661.85	27,202.33	19
20. Unpaid Expenditures.....	-0-		20
21. Total Disbursements (Add Lines 19 and 20).....	5,661.85	27,202.33	21

CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 1 OF 6

Friends of Mindy Jaffe

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/11/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Medial Assn PAC 1360 S. Beretania Street, 2nd Flr. Honolulu, HI 96814		\$1,000.00	\$1,000.00
9/11/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Tom Dinell 3694 Kewelolani Place Honolulu, HI 96816		100.00	100.00
9/11/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Gloria M. Davis 2969 Kalakaua Avenue, #106 Honolulu, HI 96815		5.00	5.00
9/11/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Janice M. Hellreich 225 Kuuhua Place Kailua, HI 96734		125.00	125.00
9/11/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Robert V. Atkinson 500 Suffolk Drive Sierra Vista, AZ 85635		50.00	50.00
9/15/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Loretta M. Palcic 747 Amana Street, #1516 Honolulu, HI 96814		25.00	25.00

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

\$1,305.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

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☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 2 OF 6

Friends of Mindy Jaffe

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/15/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Frances A. Sypniewski 4432 Desert Springs Trail Sierra Vista, AZ 85635		\$ 20.00	\$ 20.00
9/15/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Elizabeth B. Perry 3023-B Kalakaua Avenue Honolulu, HI 96815	retired	250.00	250.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Calabash donations at headquarters fundraiser		220.00	220.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Thanh N. Mougeot 434 Portlock Road Honolulu, HI 96825		100.00	100.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Isabella Forster 2460 Halekoa Drive Honolulu, HI 96821		50.00	50.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Mickey Campaniello 1750 Kalakaua Avenue, Ste. 103 Honolulu, HI 96815		25.00	25.00

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

\$ 665.00

Form CC-5(A) (Rev. 5/99)

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COMMITTEES/POLITICAL PARTIES

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STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 3 OF 6

Friends of Mindy Jaffe

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Audrey Higuchi 908 Ocean View Drive Honolulu, HI 96816		\$ 25.00	\$ 25.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Gwen I. Honjo 310 Kam. Hwy., #135 Aiea, HI 96701		25.00	25.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Frances E. Milford 95-257 Waikalani Dr. #B1004 Mililani, HI 96789		25.00	25.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kathleen O. Ahina 5333 Likini St. , PH2806 Honolulu. HI 96818		20.00	20.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Antonia M. Durbin 1717 Ala Wai Blvd., PH 1-7 Honolulu, HI 96815		20.00	20.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Cindy Horikawa 240-B Madeira Street Honolulu, HI 96813		20.00	20.00
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			\$ 135.00	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....				

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

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COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 4 OF 6

Friends of Mindy Jaffe

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Loretta Lee 928 17th Avenue Honolulu, HI 96816		\$ 20.00	\$ 20.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Linda Kato 94-1059 Kaaholo Street Waipahu, HI 96797		20.00	20.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Henry Blakstad, Jr. 2801 Coconut Avenue, #4B Honolulu, HI 96815		20.00	70.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Nancy M. Bannick 2943 Kalakaua Avenue, #408 Honolulu, HI 96815		20.00	1,020.00
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Samuel A. Aucoin 959 Kawaiki Street Honolulu, HI 96825		100.00	100.00
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Jack Schneider 1788 Kumakani Loop Honolulu, HI 96821		50.00	50.00
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			\$ 230.00	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....				

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

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☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE  
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

# STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

Friends of Mindy Jaffe

PAGE 5 OF 6

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Raymond M. Uchimura 3608 Alohea Avenue Honolulu, HI 96816		\$ 25.00	\$ 25.00
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Loretta M. Palcic 747 Amana Street, #1516 Honolulu, HI 96814		25.00	50.00
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Barbara Del Piano 240 Makee Road, #7D Honolulu, HI 96815		25.00	25.00
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Frances R. Hardy 5725 Haleloa Street Honolulu, HI 96821		20.00	20.00
9/21/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Eugenia M. McMahon 2943 Kalakaua Avenue, #404 Honolulu, HI 96815		15.00	15.00
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Republican National State Elections Committee 310 First Street, SE Washington DC 20003		2,000.00	2,000.00

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

\$2,110.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total  
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on  
Schedule B.

CHECK ONLY ONE BOX  
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☒ INDIVIDUALS/OTHER-ENTITIES/NONCANDIDATE  
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 6

OF

6

Friends of Mindy Jaffe

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Travis O. Thompson 89 Pukolu Way Wailea, HI 96753		\$ 100.00	\$ 100.00
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Linda L. Smith 2650 Pacific Heights Road Honolulu, HI 96813		100.00	100.00
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Paul E. Smith 2650 Pacific Heights Road Honolulu, HI 96813		100.00	100.00
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Audrene E. Lambeth 4533 Desert Springs Trail Sierra Vista, AZ 85635		50.00	50.00
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Russell Beckett 711 Cooke Street Honolulu, HI 96813		25.00	25.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			\$ 375.00	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....			\$4,820.00	

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.



CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER-ENTITIES/NONCANDIDATE  
COMMITTEES/POLITICAL PARTIES

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STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 1 OF 1

Friends of Mindy Jaffe

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/10/00	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Melinda S. Jaffe 234 Ohua Avenue, #118 Honolulu, HI 96815	candidate	\$640.00	\$18,281.97
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

\$ 640.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total  
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

\$ 640.00

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on  
Schedule B.

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

Friends of Mindy Jaffe

PAGE 1 OF 2

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/9/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Signs by DEY 320 Ward Avenue Honolulu, HI 96814	Yard signs and window banners	\$ 1,304.14
9/11/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION U.S. Postal Service 1130 Koko Head Avenue Honolulu, HI 96816	postage	66.00
9/14/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Trans Hawaiian 720 Iwilei Road, Suite 101 Honolulu, HI 96817	Trolley passes for event	200.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION U.S. Postal Service 1130 Koko Head Avenue Honolulu, HI 96816	postage	200.00
9/18/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Christiaan Phleger Photography 4969 Maunalani Circle Honolulu, HI 96816	Photography services	145.82
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Voter Contact Services P.O. Box 25274 Honolulu, HI 96825	Disk of registered voters	241.04
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION iDesign 3442 Waiialae Avenue, #6 Honolulu, HI 96816	Printing of postcards/posters	1,364.95
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			\$3,521.95
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 2 OF 2

Friends of Mindy Jaffe

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/22/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION iDesign 3442 Waiialae Avenue, #6 Honolulu, HI 96816	Graphic design	\$ 1,499.90
9/10/00	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Melinda S. Jaffe 234 Ohua Avenue, #118 Honolulu, HI 96815	Headquarters rent	640.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... \$ 2,139.90

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... \$ 5,661.85

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE C  
PUBLIC FUNDS AND OTHER RECEIPTS  
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 1 OF 1

Friends of Mindy Jaffe

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE

1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page).....

-0-

2. TOTAL PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only) (Transfer total to Line Number  
13 of the Disclosure Report).....

-0-

ATTACH A COPY OF THE  
EXECUTED LOAN DOCUMENT AT  
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE D  
LOANS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 1 OF 1

Friends of Mindy Jaffe

LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF LENDER NAME OF EMPLOYER AND OCCUPATION	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
DATE OF LOAN	PURPOSE OF LOAN				
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
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<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
1. SUBTOTAL (This Page).....			-0-		
2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report).....			-0-		
3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report).....				-0-	
4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)....					-0-

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE E  
UNPAID EXPENDITURES  
CANDIDATE COMMITTEE**

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MELINDA S. JAFFE

PAGE 1 OF 1

Friends of Mindy Jaffe

DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD
	PURPOSE OF UNPAID EXPENDITURE				
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
1. SUBTOTAL (This Page).....			-0-	-0-	-0-
2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....			-0-		
3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).....				-0-	
4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report).....					-0-

Form CC-5(E) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.